

Urban District of Chadderton

ANNUAL REPORT

of the

Medical Officer of Health

for the year

1945

J. S. G. BURNETT, M.D., D.P.H. Medical Officer of Health.

OLDHAM:

E. J. Wildgoose Ltd., Printers and Stationers, 41, Union Street.





Urban District of Chadderton

ANNUAL REPORT

of the

Medical Officer of Health

for the year

1945

J. S. G. BURNETT, M.D., D.P.H. Medical Officer of Health.



"Virtue, if not in action, is a vice;
And, when we move not forward, we go backward".

Massinger.

To the Chairman and Members of the Urban District Council.

With our thoughts turned from that which was ugly and vicious to the happier tasks of the future it is with pleasure that one is able to report an auspicious beginning to the period of peace. The factors of death against which we wage unceasing war were in full retreat during 1945. Infectious disease killed fewer than ever before, maternal mortality was non-existent, infant mortality reached what even a few years ago would have been considered the irreducible minimum, tuberculosis deaths have at last turned downwards in the direction of the levels existing before the war and even cancer deaths have, by some curious unexplained freak, statistically lessened in number this year.

These facts give justifiable cause for satisfaction even when full allowance is made for climatological and other non-local factors and suggest that there may be some merit in the smaller unit of local government administration that can score an infant mortality rate of half that of each of its two large neighbours.

During the war years environmental defects have been discussed vigorously and fully in the Health Committee and impatience has been expressed at the inability to give practical expression to theoretical views. 1945 has seen the beginnings of practical work. Much of this however revolves round the question of slum clearance. The houseless and the grossly overcrowded obviously must have their needs satisfied urgently and as a first consideration but it seems illogical to rehouse families on grounds of ill health, among which rheumatism and tuberculosis justifiably rank high, whilst permitting reletting of the property that has materially contributed to that state of health. The housing problem is a national one but at present the type of problem varies from locality to locality and consideration should be given to a lifting of the embargo on slum clearance where local conditions warrant it.

The problem of the unpaved street is in my own view one of extreme urgency and requires immediate practical attention as does the unkempt adopted road. It is surprising but true that the only reasonably trim and tidy portion of Broadway is that part which lies within the boundary of Royton, the smallest of the four authorities through whose areas runs that main arterial highway. Much has been written and said about the creation of magnificent new neighbourhood units possessing all the amenities but it is a hard fact that the mass of population will spend its remaining days in its present surroundings and it is vitally concerned to see that these surroundings are as attractive as possible. Slums are the product of neglect and the aphorism prevention is better than cure applies to the public health with no less force than it does to the individual well being.

I am, Ladies and Gentlemen,

Your obedient Servant,

August, 1946.
Public Health Department,
Fown Hall,
Chadderton.

J. S. G. BURNETT.

CONTENTS.

					P	AGE
INTRODUCTORY STATEM	ENT					4
MEMBERS OF COMMITTE	ES			•••		7
STAFF				•••	,	8
VITAL STATISTICS	•••					9
GENERAL PROVISION O	F HE	ALTH	SERV	ICES		16
MATERNITY AND CHILI) WEI	LFARE				17
PREVALENCE OF, AND	CONT	ROL C	VER			Ţ
INFECTIOUS DISE	ASE	•••		•••	•••	23
SANITARY CIRCUMSTAN	CES C	F TH	E AR	EA		32
HOUSING	•••	•	•••	•••		35
INSPECTION AND SUPE	RVISI	ON OF	FOC	D		37

CHADDERTON URBAN DISTRICT.

Health Committee.

Chairman:

Councillor Arthur Tongue, J.P.

Vice-Chairman:

Councillor George Lister Renshaw, I.P.

Councillor Edwin Buckley.

Councillor Harry Greenwood.

Councillor Fred Halkyard.

Councillor John Kirk (Deceased).

Councillor Victor Lamb.

Councillor Harold Halford Newton.

Maternity and Child Welfare Committee.

Chairman:

Councillor Arthur Tongue, J.P.

Vice-Chairman:

Councillor George Lister Renshaw, J.P.

Councillor Edwin Buckley.

Councillor Harry Greenwood.

Councillor Fred Halkyard.

Councillor John Kirk (Deceased). Councillor Victor Lamb.

Councillor Harold Halford Newton.

Mrs. E. Friend.

Mrs. C. Halkyard.

Mrs. M. Johnson.

Mrs. C. E. Buckley.

Staff.

Medical Officer of Health *J. S. G. Burnett, M.D., D.P.H.
Assistant Medical Officer of *V. Settle, M.B., Ch.B., B.Sc., D.C.H. Health.
Visiting Orthopædic M. Johnstone, M.B., Ch.B. Surgeon.
Consultant Obstetric R. Newton, M.D., M.R.C.O.G. Surgeon.
Dental Surgeon ‡N. Wild, L.D.S. (Manc.).
Sanitary Inspector A. Ashworth, A.R.S.I.
Additional Sanitary H. W. Potter, A.R.S.I. Inspector.
Health Visitors E. E. Tudge, S.R.N., S.C.M.
M. Scholes, S.R.N., S.C.M.
Orthopædic Nurse E. J. Bromley, C.S.S.M.G.
Day Nursery Matrons Mrs. B. W. Turnbull. S.R.N., Sc.m.
Mrs. N. Livingstone. S.Q.N.
Dental Attendant Miss E. L. Lloyd.
Assistants to the Sanitary Mr. H. Prenton.
Inspector. †Mr. N. Bamforth.
Senior Clerk †Mr. D. V. Prothero.
Clerks Miss S. Barker.
Mrs. N. Horrocks.
Miss M. Heyes.
Miss M. Shepherd.
•

^{*} These Officers carry out similar duties for the Borough of Middleton.

[‡] Part-time.

[†] On Active Service.

VITAL STATISTICS.

The main vital statistics for the year, after correction for inward and outward transfers, as furnished by the Registrar-General, are given in Table 1.

CONTRACTOR OF COMPANY		*************	,		
		T_A	ABLÉ 1		
7. 7. 1		Total	M.	F.	
Live Births :— Legitimate Illegitimate		$\frac{455}{20}$	239 11	216	Birth-rate per 1,000 estimated population mid-1945 16.1
Total		475	$\frac{-}{250}$	225	mid-1949 10.1
Stillbirths		24	, 10	14	Rate per 1,000 total (live and still) births 48
Deaths		339	163	176	Death-rate per 1,000 estimated population 11.5
Deaths from Pr	uerperal ca	uses :—		Deaths	Death-rate per 1,000 total (live and still)
Puerperal a Other mate	nd post-al	portive	sepsis	Nil Nil	Nil Nil
Total			•	Nil	Nil
Death-rate of i All infants pe Legitimate Illegitimate	r 1,000 liv infants pe	e births r 1,000	š legitima	 te live l	
Deaths from Carlo Deaths from Waths from Waths from Deaths from D	easles`(all Thooping C	ages) Cough (a	all ages)		34 Nil 1 Nil

POPULATION.

The Registrar-General's estimate of population for the year 1945 is 29,360 which is 910 below that of 1938 and 140 below that of 1944. The curve of natural population increase continues upward and in the eight years 1938-1945 the births have exceeded the deaths by 1,054. This busy industrial area has seen no material efflux of population due to war causes and the likelihood is that the actual resident population is rather higher than the Registrar-General's estimate indicates.

		TABL	E 2.		
	NATURA	L INCREASE	OF POP	ULATION.	
1945		+136	1932		29
1944		+-189	1931		23
1943		+184	1930		17
1942		+147	1929	************	105
1941		+ 87	1928	· · · · · · · · · · · · · · · · · · ·	+ 6
1940		+ 43	1927		+ 48
1939		+117	1926		- 6
1938		+151	1925		+66
1937		+ 82	1924		+134
1936		 28	1923		+95
1935		61	1922		+158
1934		+ 10	1921		+220
1933		 68			

BIRTHS.

The number of live births assigned to the town was 475, representing an annual birth rate of 16.1 per 1,000 of the population as compared with a figure of 16.1 for England and Wales and 19.2 for the 148 Smaller Towns. The material drop in the number of births occurring in 1945 is presumably related to the factors producing the fall in the national rate and there is no factor peculiar to this area which can be said to apply.

MARRIAGES.

The number of marriages occurring within the district plus those taking place at the District Registry Office, Oldham, where both participants are or the woman only is resident in Chadderton numbered 254. The corresponding figure for the previous year was 208.

TABLE 3.

	D:41	Crude	Zymotic	Infant	Cancer
Yea	Birth	Death	Death	Mortality	Death
	Rate	Rate	Rate	Rate	Rate
		-			
191	$2 \mid 24.2$	17.0	1.43	130	1.0
191		13.7	1.43	116	$\begin{array}{c} 1.0 \\ 0.6 \end{array}$
191		15.7	$\frac{1.57}{1.86}$	101	1.0
191		15.4	1.60	124	
191		14.3	1.43	88	$\begin{array}{c} 0.9 \\ 0.9 \end{array}$
191		15.0	1.19	86	
191		20.6	0.99	117	1.1
1919				126	1.0
192		13.9	0.35	98	1.2
$\begin{array}{ c c }\hline 192\\\hline 192\\\hline \end{array}$		11.8	0.74	104	1.2
$\begin{array}{c c} 192 \\ 192 \end{array}$		12.7	0.57		1.3
192		13.5	0.64	66	1.1
192		13.7	0.47	110	1.2
192		10.5	0.27	79	1.4
192		14.0	0.59	110	1.0
192		14.0	0.32	134	1.3
		13.9	0.29	92	1.2
19:		12.7	0.21	74	1.6
192		15.7	0.66	116	1.4
193		12.3	0.25	80	1.6
193		13.2	0.18	78	1.4
193		13.3	0.50	60	2.0
193	•	13.3	0.25	66	1.3
193		12.6	0.36	61	1.4
193		13.6	0.28	63	1.9
193		13.3	0.45	77	1.8
193		12.1	0.30.	68	1.5
193	,-	11.3	0.19	42	-1.9
193		11.8	0.19	50	1.7
194	10.0	14.4	0.13	59	2.4
194	10.0	12.7	0.10	42	1.8
194		12.7	0.13	51	1.7
194	10,0	12.3	0.10	46	1.8
194	10.,	12.3	0.10	47	2.0
194	5 16.1	11.5	0.07	27	1.2
		1			

DEATHS.

The number of deaths recorded for Chadderton during 1945 was 339 giving a crude death rate of 11.5 per 1,000 of the population. Some remarkable result, have appeared this year. The persistent downward trend in infectious disease mortality which has been going on since before the Four Years War and which seemingly had reached its practical nadir since 1938 actually touched a new low record of 0.07 per 1,000 of population made up of an infant death probably due to meningococcal meningitis and a death from diphtheria in an unimmunised adult.

TABLE 4.													
Age and Ward Incidence of Deaths Occurring in 1945 Under 75 and													
Ward	1	1-	2-	5-	15-	25-	45-	65-	upwards	Total			
North				1	1	12	32	33	23	109			
Central	2				1	5	36	28	33	105			
South	6	_	1	3	2	9	35	45	* 24	125			
Total	13	_	3	4	4	26	103	106	80	339			

	TABLE 5.												
Seasonal Incidence of Deaths Occurring since 1937													
Deaths occur during:—		1938	1939	1940	1941	1942	1943	1944	1945				
1st Quarter		94	113	165	131	136	98	121	117				
2nd Quarter		75	80	89	83	87	67	79	71				
3rd Quarter		84	71	103	85	67	65	66	61				
4th Quarter	85	90	99	84	87	86	129	97	90				
Total	358	343 -	363	441	386	376	359	363	339				

The infant mortality rate, concerning which more has been said in the chapter dealing with Maternity and Child Welfare, has achieved the record low level of 27 per 1,000 live births in part almost certainly due to the relative absence of infective factors and the cancer death rate at 1.2 per 1,000 of the population is lower than it has been for 20 years, a record which in my view has occurred by chance and is very unlikely to be repeated in the current year.

- consistent and a second	*********	TO MANAGEMENT		CONTRACTOR OF THE PARTY OF		CT) A T		-	-		THE REAL PROPERTY.	Zichenzamen)	OWNER OF THE PERSON NAMED IN	-
						TAI								
	COM	PARA	TIV								R	L,000		
		~		POI		ATIO Iiddle		INCE		35.		Man	T	nalond
Year	,	Cromp ton		201140		ton		Chad- derto:		oldha:		Man- cheste		ngland Wales
1925		$\frac{100}{2.0}$		Royto 1.4	11	1.4		$\frac{1.0}{1.0}$			111 (1 X	1.3
$1925 \\ 1926$	• • • •	1.4		1.4		1.3		1.3	• • •	1.4				1.4
$\frac{1920}{1927}$	• • •	$1.4 \\ 1.5$	• • •	0.9	• • • •	$1.5 \\ 1.5$	• • • •	$\frac{1.3}{1.2}$	• • •	$\frac{1.0}{1.5}$	• • •	$\frac{1.5}{1.5}$		1.4
$\frac{1927}{1928}$	• • •		• • •	1.8	• • •	$\frac{1.5}{1.2}$	• • •		• • •		• • •	1.5	• • •	1.4
	• • • •	$\frac{1.5}{1.6}$	• • •	$\frac{1.8}{1.3}$	• • • •	1.3	• • • •	$\frac{1.6}{1.4}$	• • •	$\frac{1.5}{1.6}$	• • •	1.6	• • •	
1929	• • • •		• • •	$\frac{1.3}{1.7}$	• • •		• • • •		• • •		• • •		• • •	1.4
1930	•••	1.6	• • •		• • •	1.6	• • • •	1.6	• • •	1.6	• • •	1.5	• • •	1.5
1931	• • • •	1.7	• • •	0.6	• • •	1.7	• • •	1.4	• • •	1.5	• • •	1.6	• • •	1.5
1932	•••	1.3	• • • •	1.4	• • •	1.5	• • •	$\frac{2.0}{1.0}$	• • • •	1.7	• • •	1.7	• • •	1.5
1933	•••	$1.0_{-1.5}$	• • •	1.4	••,•	1.9	• • •	1.3	• • •	1.5	• • •	1.6	• • •	1.5
1934	• • •	$1.5_{-0.0}$:**	1.7	• • • •	1.8	• • •	1.4	• • •	1.6	• • • •	1.7	• • •	1.6
1935	•••	2.0	• • •	1.5	•••	1.5	• • •	1.9	• • •	1.8	• • •	1.8	• • •	1.6
1936	• • • •	1.4	• • •	1.6	• • • •	1.9	• • • •	1.8	• • •	1.9	• • • •	1.7	• • •	1.6
1937	• • •	1.8	• • •	1.4	• • •	1.3	• • •	1.5	• • •	1.8	• • •	1.7	• • •	1.6
1938	• • •	1.3	• • •	1.9	• • •	2.0	• • •	1.9		1.9		1.8	• • •	1.7
1939	• • •	1.8	• • •	1.6		1.8	• • •	1.7	• • •	1.9	• • •	1.8	• • •	1.6
1940	• • •	2.0	• • •	1.5	• • •	1.3	• • •	2.4	• • •	1.8		2.0	• • •	1.7
1941	• • •	1.5		1.9	• • •	2.1	• • •	1.8	• • •	1.9		2.1	• • •	1.7
1942		2.4		2.7	• • •	2.0		1.7	• • •	2.0		2.1		1.7
1943		2.5		2.3		1.9		1.8		2.0		2.1		1.7
1944		1.8		2.1		2.1		2.0		1.8		2.1		1.7
1945		2.3		2.2		2.1		1.2		2.1		2.1		1.7

When we turn to the classified causes of death it is seen from Table 7 that fully two-fifths of the deaths are ascribed to cardio vascular lesions and one-fifth to respiratory diseases excluding influenza and tuberculosis. The primary factor either in respiratory or cardio vascular deaths might be an infecting agent or it might be that the wear and tear of life on these organs has predisposed them to disease or fatal injury. Grouping the 140 deaths ascribed to cardio vascular lesions shows that 70% of the deaths occurred at 65 years of age and over and 88% occurred at 55 years and over. A similar grouping of the 67 respiratory deaths gives corresponding figures of 48% and 78% respectively.

Congog of		TABI			Dati				
Causes of T				Death		0 01			
Į.	P	roport	tion p	er 1,00	00 dea	ths fr	om al	l caus	es.
Cause of Death							1938		
Diseases of the heart and									
circulatory system	410	366	312	353	401	242	324	307	264
Bronchitis, pneumonia and									
other respiratory diseases									
(excluding influenza)	198	151	161	165	142	186	108	119	162
Cancer, malignant disease	100	165	150	138	145	165	163	138	131
Tuberculosis (all forms)	44	5 5	56	45	28	23	55	26	57

	TABL	E 8.			
Corresponding	Figures-	-England	and Wale	s.	
•	Proport	ion per 1,0	000 death	s from a	ll causes.
Cause of Death.		1940-41		1935	1930
Diseases of the heart and circulatory system Bronchitis, pneumonia and	317	292	327	295	245
other respiratory diseases	108	135	91	00	114
(excluding influenza) Cancer, malignant disease		$\frac{135}{124}$	143	$\frac{99}{135}$	127
Tuberculosis (all forms)		5!	55	62	79

The implication is that severe acute infection was not present in the area to any great extent during 1945, probably in association with absence of prolonged severe weather and that in consequence a corresponding saving of life occurred especially in infancy but also in middle life.

It is unlikely that the death rate in the future will be brought much lower than this figure because apart from a further reduction in the tuberculosis death rate and the infant mortality rate and a possible specific cure of cancer the principal factor in the production of death is wear and tear of vital organs and at best we can hope for delay in the process of wear and tear. It is likely that the prolongation of the expectation of life will continue, but with the gradual ageing of the population as a group a lower crude death rate than that occurring in a favourable year, such as the one under review has been, is not in the least likely.

	TABLI				
	Causes of Death in Chadder	ton	durin	g the year	1945.
	Causes of death			Males	Females
1.	Typhoid and paratyphoid fev	ers			
2.					1
3.				-	
4.			• • • /	1	
5.	Diphtheria				1
6.	Tuberculosis of respiratory s	vste	m	5	3
7.	Other forms of tuberculosis			3	4
8.	Syphilitic diseases			1	
9.	Influenza				2
10.	Measles				
11.	Acute poliomyelitis and				1
	polioencephalitis				
12.	Acute infectious encephalitis				
13.	M.— Cancer of buccal cavity				
	œsophagus	. =		3	
13.	F.—Cancer of uterus				2
14.	Cancer of stomach and duode	enun	n	3	2
15.	Cancer of breast				2
16.	Cancer of all other sites			11	11
17.	Diabetes			1	2
18.	Intra-cranial vascular lesions	3		14	16
19.	Heart disease			37	64
20.	Other diseases of circulatory	sys	stem	5	4
21.	Bronchitis			24	23
22.	Pneumonia			8	8
23.	Other respiratory diseases		• • • ,	4	
24.	Ulcer of stomach or duodenu			5	
25.	Diarrhœa (under 2 years)				
26.	Appendicitis				1.
27.	Other digestive diseases			6	4 ′
28.	Nephritis			3	5
29.	Puerperal and post-abortive				
30.	Other maternal causes	-		_	
31.	Premature birth		•••	1	1
32.	Congenital malformation, bir				
	injury, infantile diseases			3	
33.	Suicide			5	
34.			•••	2	- 1
35.	Other violent causes			4	3
36.				14	17
				1.62	176
	All causes		• • •	163	176

GENERAL PROVISION OF HEALTH SERVICES.

The policy of disseminating information in support of public and personal hygiene by means of the film, the press, and by public poster and handbill has been continued and exhibitions of films were held in the Town Hall for public audiences, in welfare centres for parents and in schools. The subjects dealt with in their appropriate age groups included environmental problems, e.g. atmospheric pollution, social problems such as the rehabilitation of the injured, welfare problems associated with the maintenance of maternal and child health and problems relating to the physical and mental health of the school child.

In the field of maternity and child welfare the Council decided to support in principle a scheme for the establishment of a chair of Child Health at the University of Manchester and reviewing its arrangements with St. Mary's Hospitals agreed to substitute a per capita payment of not more than £5 5s. 0d. per week in respect of approved admissions in lieu of the previous honorarium of £20 per annum. Arrangements were made further for the provision of convalescent home therapy for children under five years of age where accommodation is available.

The inadequacy of the buildings utilised for general clinic purposes is materially greater than in 1938 owing to the expansion of services that has occurred in the interim and a revised and modernised scheme for new clinic premises is a matter for immediate consideration. The completely unsatisfactory provision for the cleansing of verminous persons is an obvious example of the urgency of the problem before us. It is indeed fortunate that with the lessening hours of work there has been a corresponding decrease in the amount of head louse infestation in young women. The infestation however seems merely to have subsided to its pre-war level and there are still reservoirs that await mass destruction. Scabies also is much less prevalent than it was a few years ago.

MATERNITY AND CHILD WELFARE.

NOTIFICATION OF BIRTHS.

Under Section 203 of the Public Health Act, 1936, 486 live births and 24 stillbirths were notified.

MIDWIFERY AND MATERNITY SERVICES.

The regular attendance of pupil midwives at the ante-natal sessions has caused these to become to some extent teaching in character, a function which is advantageous to patient, staff and pupil alike. With the likelihood that health visiting personnel will be at full strength during 1946 for the first time since 1943 it is intended that a health visitor shall also attend this clinic to coordinate the work of pre-natal hygiene and to facilitate the supervision of the new born child in the transition period at the end of its first two weeks of life.

MATERNITY SERVICES.

As noted above new financial arrangements were entered into with St. Mary's Hospitals for the in-patient treatment of approved patients. The lowered birth rate reduced the total demand for hospital accommodation somewhat but the ratio of hospital to domiciliary confinements continues at about 2:1.

		Num	ber o		LE 10.	ths N	otified.		
Year	Boundary Park Municipal Hospital	Woodfield Nursing Home		Greenacres	North Manchester Maternity Home	Others	Total Hospital Births	Total Domiciliary Births	Tota
1933	78		13	2		8	101	224	325
1934	98		16	16	1	16	147	221	368
1935	105		7	16	5	15	148	217	365
1936	107	_	15	21	6	14	163	210	373
1937	143		23	20	14	37	237	233	470
1938	146	_	16	29	12	35	238	308	546
1939	160		16	34	18	30	258	266	524
1940	158	_	12	31	17	. 30	248	.246	494
1941	215	_	9	_	11	19	254	240	494
1942	276	_	12	_	9	26	323	198	521
1943	289		15	_	7	38	349	221	570
1944	314	37	13		4	10	378	221	599
1945	271	33	13		8	5	330	180	510

Table 10 shows the number of notified confinements at hospitals, nursing homes and at home in each year since 1933.

MATERNAL MORTALITY.

No maternal death was registered during the year 1945.

In the eight years that have elapsed since the establishment of an ad hoc ante-natal service in Chadderton 1,114 women, practically all subsequently confined in their own homes and representing 26% of the total confinements notified in the period, made use of the service and were subsequently confined without a single maternal fatality. Amongst the remaining 74% there occurred 14 maternal deaths.

The two major factors in the success of the service are the regular attendance at the sessions and the active co-operation of the County Council midwives who subsequently undertake the management of the confinement in the patient's home and the personal supervision at least once in the course of confinement of every case by the consultant obstetric surgeon through whom there is immediately available for every potentially or actually abnormal case all the facilities of St. Mary's Hospitals, Manchester.

ANTE-NATAL CLINIC.

180 women were confined in their own homes during 1945 when 105 women attended the ante-natal clinic, of whom 4 were referred and subsequently delivered at St. Mary's Hospitals.

271 women were confined at Boundary Park General Hospital, Oldham, and the practice has been continued of referring immediately for ante-natal supervision at that hospital any woman found to come within this group.

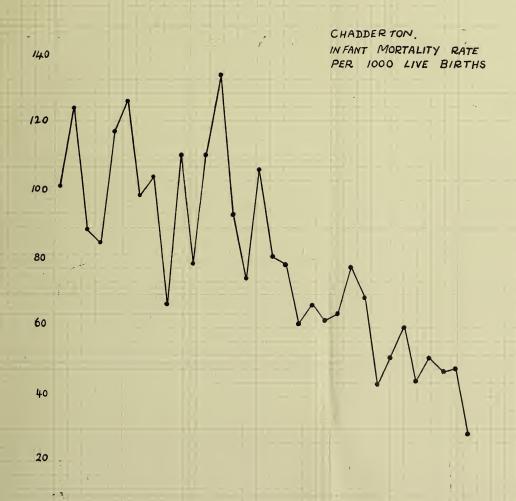
POST-NATAL SERVICES.

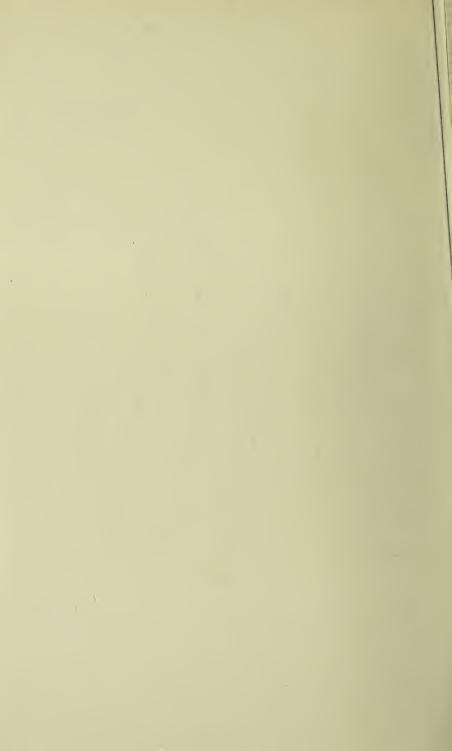
No ad hoc clinic has been established but 3 cases were seen at the ante-natal clinic by the obstetric surgeon for special advice.

STILLBIRTHS AND INFANT MORTALITY.

Stillbirths during 1945 totalled 24 representing a rate of 48 per 1,000 total births or 1.12 per 1,000 of population. The corresponding figure for England and Wales is 0.46 and for the 148 Smaller Towns 0.53. Infant deaths amounted to 13 giving an infant mortality rate of 27 per 1,000 live births as compared with rates of 46 for England and Wales and 43 for the 148 Smaller Towns.

Gratification at the magnificent figure for infant mortality which, as can be seen from Table 3, far transcends any previous result and is little beyond half the national rate must be tempered by the unsatisfactory nature of the still-birth rate. Examination of the causes of infant death as set out in Table 12 reveals that deaths under one month totalled four in which, as they are





GRAPH I

CHADDERTON STILLBIRTH & NEONATAL MORTALITY RATE PER 1000 TOTAL BIRTHS

CHADDERTON STILLBIRTH RATE PER 1000 TOTAL BIRTHS



certified, infection did not play any part. Of the remaining nine deaths 2 were related to congenital debility and malformation and 7 to infection. Part of the saving of infant life, therefore, is due to lessened infection or less probably to greater resistance to infection but there is also an apparent reduction in the group related to prematurity, debility and malformation which group is closely linked with stillbirths. If then the neonatal deaths, none of which happens to be attributable to infection, are added to stillbirths the total of 28 equals a combined stillbirth and neonatal rate of 56.1 per 1,000 total births.

Graph I shows the persistent fall in the infant mortality rate since 1929 whilst Graph II shows the combined stillbirth and neonatal rate and the stillbirth rate each per 1,000 total births since 1928 when stillbirths first became registrable. Whilst the combined rate has fallen from a peak 112 in 1931 to 54 in 1945 the stillbirth rate has receded only from 69 in 1928 to 48 in 1945. This would seem to imply that providing the child survives the process of birth even though premature or immature its chances of survival beyond one month are appreciably increased. On the other hand the hazards of birth itself or of intra uterine death have not diminished nearly so much.

The conclusion is that the spearhead of the attack must be directed at the health of the expectant mother and her unborn child. Her nutrition must be adequate, her rest must be reasonable and after the birth of the first child it is rarely so, her physical environment must be encouraging and helpful and her mental environment peaceful and happy. This is the problem that we are required to solve.

CHILD WELFARE SERVICES.

Four welfare sessions continue to be held weekly, two at the Central Clinic and two at Washbrook. Dental, orthopædic and ultra violet therapy continue to be provided and visual defects are treated at the refraction clinic.

The two day nurseries have continued to function effectively and the end of the war has seen an increasing demand for accommodation. The average attendance during 1945 at Brook Street nursery was 31 and at Coalshaw Green nursery was 28, representing 77.5% and 70% of capacity respectively.

A record of home visits by Health Visitors and of attendances at Maternity and Child Welfare centres since 1939 is given in Table 11.

TAI	BLE 1	1.					
CHILD WELFARE CLINICS. Number of children who attended for the first time during the year and who, on the date of their first attendance were:—	1939	1940	1941	1942	1943	1944	1945
(i) under 1 year of age (ii) between the ages of 1 and 5 years	363 43	381 88	356 59	459 32	435 47	437 28	395 33
Percentage of notified births represented by the number of children who on the date of their first attendance were	72.6	80.0	75.3	87.8	79.4	75.2	81.4
Number who attended and at the end of the year were:—							
(i) under 1 year of age		278	263	336 492	342 545	337	330
(ii) between the ages of 1 and 5 years Number of attendances by children:—	638	536	502	492	949	558	523
· ·	6888	6270	6962	7243	8194	8628	7574
(ii) between the ages of 1 and 5 years	6144	4496	5769	4453	4659	4614	3695
ANTE-NATAL CLINICS. Number of expectant mothers attended	119	162	159	134	130	115	105
Number of attendances by expectant mothers	393	443	575	380	382	391	286
Percentage of total notified live and still births represented by the number of expectant mothers who attended the Ante-Natal Clinics	21.0	30.5	32.7	24.7	23.8	19.1	20.6
GYNÆCOLOGICAL AND POST-NATAL CLINICS.							
Number of mothers attended	10	10	9	4	9.	10	3
Number of attendances	11	24	11	5	21	11	3
HEALTH VISITING.							
(i) To expectant mothers:— First visits	212	205	252	214	203	215	208
Total visits	370	366	447	292	305	397	329
(ii) To children under 1 year of age :-	_						
First visits	492	463	472	503	545	556	491
Total visits	2922	3098	3286	3041	3161	3171	3423
(iii) To children between the ages of 1 and 5 years:—							
	3842	4457	5198	4819	5219	5441	5110

Seven premature births occurring in domiciliary practice were nursed at home and survived the first month of life. An eighth premature domiciliary birth admitted to hospital on the day of birth died there one week later. 24 premature births belonging to the area occurred in hospital and all survived the first month of life.

•	T.		BLE	-										
Infant Mortality, 1945														
	1	1-7	1-4	Total	1-3	3-6	6-12	Total						
Cause of Death	day	days	w'ks		m'ths	m'ths	m'ths							
Meningitis					1		_	1						
Whooping Cough	—			_	_		1	1						
Pneumonia		_		—	2	1		3						
Acute Bronchitis					1	—	_	1						
Ludwig's Angina			_		1	_	—	1						
Prematurity		2		2		-	_	2						
Congenital Debility,														
Malformations,														
etc	2			2	1	 .	_	3						
Post-operative														
Fæcal Fistula					1	—		1						
Total	2	2	_	4	7	· 1 ·	1	13						

PUERPERAL PYREXIA.

No case was notified during 1945.

PEMPHIGUS NEONATORUM.

No case was brought to notice during 1945.

OPHTHALMIA NEONATORUM.

No case was notified during 1945.

OTHER INFECTIOUS DISEASES.

The number of cases occurring and deaths from infectious diseases are shown in Table 13.

TABLE 13

Infectious Diseases in Children under Five Years

	0-1	year	1-5	vears
Disease	Cases	Deaths	Cases	Deaths
Diphtheria	_		 4	
Scarlet Fever			 . 24	
Pneumonia	1	3	 	
Non-Pulmonary Tuberculosis			 3	2
Whooping Cough	7	1	 32	<u>·</u>
Measles	10		 97	_

PROVISION OF MEALS AND MILK.

7,291 pounds of dried milk were disposed of, 650 packets being supplied without charge to the recipient.

Vitamins and iron products are available also at the Welfare Centres.

CHILD LIFE PROTECTION.

No legal proceedings were taken and no person was registered as receiving children for reward at the end of 1945.

TABLE 14.		Ņ
Number of persons on the Register who are receiving reward at the end of the year Number of children on the Register :—		
(i) at the end of the year (ii) who died during the year	 	_
(iii) on whom inquests were held during the year	 •••	

PREVALENCE OF, AND CONTROL OVER INFECTIOUS DISEASE.

The number of cases of infectious disease notified in each year since 1915 is shown, classified according to the particular disease in Table 17, whilst the ward incidence of certain of the notifiable diseases during each of the last twelve years is shown in Table 18. The number of deaths from certain diseases occurring in each year since 1915 is shown in Table 19.

So far as the infectious diseases are concerned the year 1945 was a healthy one. Diphtheria, which has continued smouldering in recent years, flared up in one ward to remind us that vigilance is as necessary as ever and a small outbreak of dysentery in a nursery was aborted by rigid hygienic measures and a follow up of contacts. Mortality as can be seen from Table 19 was lower than ever.

SMALLPOX.

No case of this disease has occurred in the area since 1930.

SCARLET FEVER.

As was prognosticated in last year's report scarlet fever declined rapidly to 118 cases during 1945 from the heavy incidence recorded in the previous two years, and in the fourth quarter when the expected incidence is heaviest only half the number of cases occurred as compared with the corresponding period for 1944.

The epidemic that first made its appearance in the South ward in the second half of 1942 produced 610 notifications in the four years. The whole area of the urban district was involved at one time or another and 21.47% of cases were under 5 years of age. It is likely that notification of the disease amongst adults was less strict than amongst children. The disease was in the main mild in character and no death from scarlet fever has occurred since 1935. Once a school became materially involved it was extremely difficult to control infection in it. The most successful procedure seemed to consist in repeated inspections of all pupils in attendance at the school involved with exclusion and home follow up of any showing the earliest clinical evidence of upper respiratory infection. This onerous and rigid routine proved reasonably if not absolutely effective in abating school outbreaks.

60% of notified cases were treated in hospital during 1945.

DIPHTHERIA

The potential danger still existing in diphtheria was dramatically revealed in a sharp outbreak of the disease occurring on the north-eastern boundary of the district. Three cases occurred in rapid succession, two in the same family, and all attending the same school. Later a further case was diagnosed as late faucial and nasal diphtheria, the child having been mildly ill for at least a week previously. A whole train of events developed from this last case, 6 cases including 4 adults occurring all, on investigation, proving to be directly linked with the boy in question by family contact. One other case was linked indirectly by school and four transient carriers appeared in the family of this last child. 4 of the 11 cases fell within the age group 20-25 years and of the 7 cases under 15 years 4 had been immunised at some previous date, none being severely ill. One unimmunised adult female died from severe toxic faucial diphtheria. The causal organism was isolated from several cases and found to be of the "gravis" type.

In addition to the eleven cases involved in this outbreak 8 other sporadic cases occurred during the year without further fatality.

		TAH	BLE 1	6.		
		Diphtheria	Attack	Rate :		
		·		England an	d	Smaller
Year		Chadderton		Wales		Towns
1938	 	1.91		1.58		1.53
1939	 	0.62		1.14		1.16
1940	 	0.36		1.16		1.21
1941	 	0.30		1.25		1.19
1942	 	0.71		1.05		0.91
1943	 	0.65		0.88		0.77
1944	 	0.34		0.58		0.69
1945	 	0.64		0.46		0.56
		Diphtheria	Death	Rate :		
1938	 	0.16		0.07		0.06
1939	 	0.06		0.05		0.04
1940	 	0.00		0.06		0.05
1941	 	0.00		0.07		0.06
1942	 	0.04		0.05		0.04
1943	 	0.03		0.03		0.04
1944	 	0.00		0.02		0.03
1945	 	0.03		0.02		0.02

The influence of this outbreak in a small area is sharply brought out by its marked effect on the local attack and death rates both of which as can be seen from Table 16 exceed the national rates for the first time for some years.

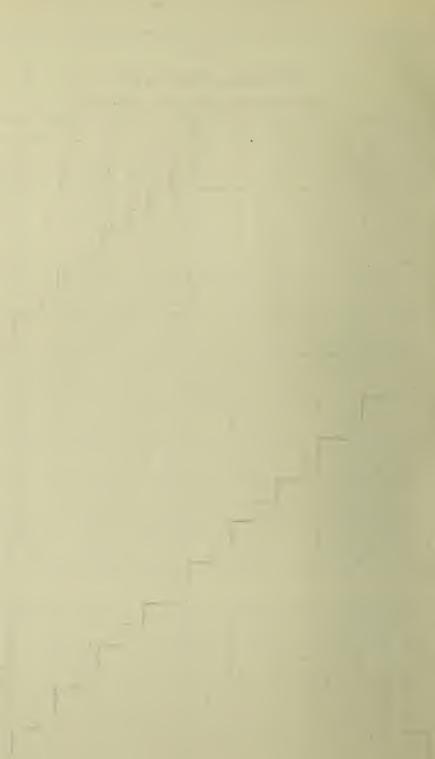
TABLE 15.

DIPHTHERIA IMMUNISATION.

Persons inoculated each year from 1936-1945.

Age at date of												10.40						10.12		
inocu- lation	1936	1: *1	937 2	1 1	938	1: 1	939 2	1: 1	$\begin{array}{c} 940 \\ 2 \end{array}$	19	$\frac{941}{2}$	19 1	$\frac{942}{2}$	19 1	9 43 2	1	19 44 2	1 1	9 45 2	
Under 1	6	6	3	-	_	1	_	-	6	12 17		42 49		49 60		48 67		66	85	
1	27	12	6	2	20	24	35	18	54	60	70	81	55	75	80	59	112	46	112	
11/2	11	5	3	-	7	3	11	-	13	24	9	26	20	23	12	10	7	10	13	
2	21	3	2	1	8	8	6	1	10	19	16	17	24	9	7	9	8	5	9	
$2\frac{1}{2}$	15	3	2	-	8	1	4	2	13	25	16	9	15	12	7	2	3	2	10	
3	12	7	2	1	3	1	2	1	15	29	19	13	30	20	10	3	5	1	7	
$3\frac{1}{2}$	17	2	1	-	-	4	5	-	5	20	14	7	20	10	5	2	1	6	4	
4	20	5	6	1	7	3	2	-	9	22	15	18	27	14	9	1	1	-	1	
41/2	7	3	-		1	3	2	_	11	18	15	15	18	12	6	5	1	2	2	
5	70	25	31	12	27	29	10	4	38	38	38	28	37	41	20	16	13	6	5	
$5\frac{1}{2}$	82	12	3	1	10	16	10	_	31	22	19	10	19	14	6	13	3	_	4	
6	79	10	2	2	4	12	9	_	25	25	10	20	21	18	3	14	9	2	1	
$6\frac{1}{2}$	64	12	2	_	2	21	5	1	17	27	13	13	12	8	2	4	1	2	2	
7	78	14	3	_	3	17	3	1	11	24	8	11	11,	7	4	7	2	2	1	
7 1 /2	86	8	1	1	4	2	3	_	4	16	9	4	7	2	_	2			1	
8	78	7	-	-	4	5	1	-	5	30	5	7	14	3	1		1	_		
81/2	90	6	3	-	2	_	<u></u>	2	5	30	4	4	15	2	_	_	_	_	3	
9	91	5	3	_	3	1	_	Ŀ	3	20	2	3	16	5	2		_	_	2	
$9\frac{1}{2}$	82	3	2	<u> </u>	4	_	_	-	3	18	3	3	15	2	2	1	_			
10	75	1	-	_	3	_	1	_	3	19	1	2	25	4	2	_	_		_	
10½	80	1	1	<u> </u>	_	_	_	-	-	15	_	2	11	_	-	_	_	_	_	
11	88	1	1	_	_	1	_	_	3	18	1	1	9	3	1	1		_	_	
111	80	1	2	<u> </u>	_	1	_	-	5	21	1	6	13	-	_	_		_	1	
12	75	1	2	_	_	1	_	<u> </u>	1	13		7	5	2	3	_			1	
$12\frac{1}{2}$	83	1	5	ļ- -	_	1	_	-	1	15	_	6	5	1	1	_		_	_	
13	68	2	-	-	_	-	-	-	3	6	_	7	4	3	_		_		1	
131/2	73	5	-	-	_	_	1	-	-	12	1	1	4	1	1				2	
14	10	-	-	-	-	-	-	-	1	3	_	-	2		_					
14½				-		-	-	-	-				_	-	-	E	-			
15+	_	-	-	-	-	-	1	-	-	-	-	-	3	-	1	-	_	4	-	
Total each yr.	1568	1568 247]	141		266		27	90)7	869		585		431		417		

^{*1=}Jan. to June. 2=July to Dec.



Immuni ation continued to be carried out at the Welfare Centres during the year when 417 children were immunised. The shortage of nursing staff prevented systematic home visitation being carried out and more than three-quarters of the children immunised were approximately one year old and attending regularly the welfare centres. It is estimated that at the end of 1945 56.5% of children under 5 years of age and 74.8% of children between the ages of 5 and 14 years inclusive had been immunised through the medium of the authority's scheme. In addition an appreciable number of children are immunised under private arrangements. Table 15 records the progress of the scheme since its inception in 1936.

Moreover 118 children received a reinforcing dose of prophylactic during 1945, 668 children having been so reinoculated since January, 1941.

PNEUMONIA.

12 cases of pneumonia were notified in 1945. Two-thirds of the cases were males and 7 developed the disease in the first seven weeks of the year. Two cases were admitted to hospital and both recovered, 2 deaths occurring among the 10 cases nursed at home. In addition a further 14 deaths were recorded from all forms of pneumonia of which 2 occurring in hospital and 1 at home could be classified as having suffered from primary pneumonia. It might reasonably be assumed that in 1945 15 cases of primary or influenzal pneumonia had their origin in this area among which 5 deaths occurred.

DYSENTERY.

10 cases of dysentery were notified during 1945.

A small outbreak of bacillary dysentery of the sonné variety occurred at a day nursery, five cases occurring in a period of 72 hours. One secondary case, a home contact school child, was discovered and later the organism was recovered from the fæces of a healthy mother who admitted having diarrhæa coincidentally with her child's illness. All the cases recovered under treatment. The nursery had a full complement of children in attendance and the abrupt cessation of the outbreak following the introduction of stringent hygienic measures in the nursery is a reflection of the care and industry of the matron and staff in combating the outbreak.

Four other cases unconnected with the outbreak were notified during the year. One adult male died in hospital from bacillary dysentery, no causal organism having been isolated.

TABLE 18.

WARD INCIDENCE OF INFECTIOUS DISEASES NOTIFIED SINCE 1934.

	1942 1943 1944 1945	10	I. 5 2 9	4 6	21 19 10 19	19 31 68 35	27 48	127 78	113 185 194 118	0 0	0 0 0 0	0 0	0	5 7 13 10	-1	9 13	33 23 31 31		5 6 3 2 5	55 50	20 16 11 9	0	0	61		5 10 3 4	27	19	34 41 26 12
200	0 1941		ତା			25			47		0		က	က			23		4		11	0		0			15		30
	1939 1940		4 4		11 61	28 13			66 43		0 4		8 0	7	0 7		30 20		10		13 10		0 0	0 2	0 3	9 2	4 9		19 32
	1938	23			58 1	34 2			82 6		0		0	4			23 3		5		15 1	0	0	0	0	6	6	14	32
200220	1937	4	4	5	13	34	19	17	70	0	0	0	0	œ	6	12	29	7	ŭ	9	15	_	0,	0	_	10	12	4	26
	1936	Ξ	10	18	39	19	18	17	54	0	0	O,	0	7	9	90	21	9	9	4	16	લ	-	0	ಣ	6	13	10	32
	1935	oo	7	23	38	34	39	33	106	0	0	0	0	5	œ	œ	21	7	က	က	13	0	0	0	0	11	20	13	44
	1934	7	=======================================	12	30	39	27	17	83	0	0	0	0	6	6	10	23	4	7	1	18	0	0	0	0	15	18	7	40
	Ward	z	၁	S	T	z	၁	S	T	Z	၁	S	T	Z	၁	S	Т	z	၁	S	T	Z	ပ	S	H	Z	ပ	S	<u></u>
	Disease		Diphtheria				Scarlet Fever				Enteric Fever				Pulmonary	Tuberculosis			Non-Pulmonary	Tuberculosis			Cerebro Spinal	Fever			Pneumonia		

MEASLES.

177 cases of measles were notified during 1945 the cases occurring mainly in the North ward during the first half of the year. One case was admitted to hospital and no death from this disease occurred.

ERYSIPELAS.

8 cases occurred in 1945 two being treated in hospital. No death occurred.

WHOOPING COUGH.

54 cases of whooping cough were notified amongst which there was one death. Two cases were admitted to liospital both of which recovered.

CEREBRO SPINAL FEVER.

One notified case recovered after treatment in hospital and one unnotified case died at home from meningitis certified to be meningococcal in character.

ENTERIC FEVER, OPHTHALMIA NEONATORUM, ACUTE POLIOMYELITIS, PUERPERAL PYREXIA, ACUTE POLIOENCEPHALITIS, ACUTE ENCEPHALITIS LETHARGICA AND MALARIA.

No case of these diseases was notified during 1945.

CHICKEN POX.

58 cases of chicken pox were known to have occurred in 1945. All cases were nursed at home and no death took place.

TUBERCULOSIS.

New cases of pulmonary tuberculosis continue to be notified at the higher rate established during the war years 31 cases being notified, though new non-pulmonary disease continued to lessen and only 9 cases were notified. 15 deaths ascribed to tuberculosis occurred.

At the end of 1945 65 males and 51 females were listed in the register as suffering from pulmonary tuberculosis and 36 males and 33 females as suffering from non-pulmonary tuberculosis making a total of 185 residents in the district formally registered as suffering from this disease.

																											_				
Influenza		_	5	-119	36	7	14	19	13	7	12	18	18	П	39	27	10	4	20	9	9	∞	14	4	4	11	4	4	9	2	2
Prieumonia (All forms)	22	22	20	41	36	20	16	25	43	54	28	27	30	13	33	28	17	27	13	17	31	22	14	22	14	2]	17	23	16	11	16
Cerebro Spinal Fever			1	1	1	-					l		1		1	1		-				01	_			ા	€.1	_	1	_	1
Canc r	25	25	31	59	36	35	39	33	36	40	28	36	33	4.5	41	46	0 F	99	37	39	52	51	45	56	55	73	99	52	54	61	34
Tuber- culosis	31	33	45	38	22	- 56	 	33	21	25	24	27	58	25	23	50	19	17	21	25	10	14	13	19	17	10		17	20	20	15
Diphtheria		20	4	<u>-</u>	_	ဢ	4	70	က	07	4	01	က	4		-	1			4	4	က	C 1	5	67		1	_	_	1	1
Whooping Cough	5	10	27	=		က	_	01	ಬ	1	4	4	_	_	14	1	67	67	က	_	_	က	67	1	_	1	l	_	1	1	1
Diarrhœa	18	4	50	4	9	=	∞	ಸ	61	50	9	က	က		က	က	_	က	_	က	က	c)	4	-	4	61	67	C1	61	3	-
Enteric Fever	က	_	-		1	_			1	1		1		1	1		_	_	1						1	1		-		1	-
Scarlet Fever		_	_	_		2	က	.7	_	1	-	1	1			1			ડા	1	_	1		İ	1				1	į	1
Measles	13	Ξ	17	ા	01	01		ಸಂ	က	_	22		1	_	67	4		%		01		က		1	1	67	_		1	1	-
Puerperal Fever	-	67	1	†	63	23		-	_		_		3		1	_			-	:7	_	_	_	_	-		1		1	I	1
Smallpox				1			-	1		1	1	1	1		1		1	-	1				1	-	1	-	1	1	1	1	1
YEAR	1915	1916	1917	8161	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945

				TA	BLE	20.				
	Cases	Notif	ied and	l Deaths	from	Tuber	culosis	during	g 19 4 5	
			New	Cases				De	aths	
				No	n-				No	n-
		Pulm	onary	Pulmo	nary		Pulm	onary	Pulmo	onary
Ages		Μ.	F.	Μ.	F.		M.	F.	Μ.	F.
0-1		—	—		—			—		
1-5		1	1	2	1			_	1	1
5-10				1	1			_	_	-
10-15	• • •	—		-	—	• • • •		'	_	_
15-20	• • •			_		•••	1	1	_	
20-25		3	1	_	1	• • •		_	_	—
25 - 35	• • •	6	5	1		• • •	1	2	_	
35-45	• • •	5				• • •	2		1	1
45-55	• • •	5	1		1	• • • •	I		1	Ţ
55–65		2			1	• • • •		_		1
65 and				-0						
ove	er		ı		_	•••		. —		
		22	9	4	5	•	5	3	3	4
		3	1	9			8	3 .	7	1

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

PUBLIC HEALTH ACT, 1925, SECTION 172.

No action was found necessary under these enactments during 1945.

TABLE 21.

NOTIFIABLE DISEASES

Number of cases of infectious diseases notified, number of deaths from these diseases, number of cases removed to hospital, and deaths in hospital during the year 1945.

						Ü	Cases Notified	Jotifie	in the						H	Hospital
i	Total						Years	rs							Cases Re-	Hospital
Disease	Cases at	Under	1-2	2-3	3.4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	and over	Total Deaths	moved to Hos- pital in	
															district	
Smallpox	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	;
Diphtheria	19	:	က	:	:	:	<u>ب</u>	က	7	9	_	:	:	_	19	_
Erysipelas	∞	:	:	:	:	:	:	:	:	:	2	 	©1	:	ા	:
Scarlet Fever	118	:	61	_	12	က	44	87.	14	4	2	01	:	:	71	:
Enteric Fever	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:
Puerperal Pyrexia	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:
Cerebro-Spinal Fever	_	:	:	:	:	_	:	:	:	:	:	:	:	_	_	÷
Acute Poliomyelitis	:	:	:	:	:	:	:	:	:	:	:	:	:	:	i	÷
Ophthalmia Neonatorum	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	÷
Malaria	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	÷
Trench Fever	:	:	:	 :	:	:	:	:	:	:	:	:	:	:	:	:
Dysentery	10	:	ಸ	:	:		~		:	:			:	_	<u>~</u>	
Encephalitis Lethargica	:	÷	÷	:	:	:	:	:	:	:	:	:	:	:	:	:
Pneumonia	12	_	:	:	:	:	:	_	:	4	_	4	~	91	ઝ	ග
Measles	177	10	17	24	28	28	69		:	:	:	:	:	:	_	:
Whooping Cough	54	_	<u>∞</u>	7		9	<u> </u>	ગ	:	:	:	:	:	_	C1	:
Pulmonary Tuberculosis	31	:	:		_	:	:	:	:	15	70	00		œ	26	က
Non-Pulmonary "	6	:	:	က	:	:	C1	:	:	21	:	07	:	7	9	5
,																
Totals	439	18	35	42	52	39	134	36	<u> 5</u>	31	12	21	4	35	138	19
				-	-					-						1

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

The water supply to the area is ample in sufficiency and excellent in quality. It is derived mainly from the Oldham Corporation, but in part also from the Middleton and Heywood Water Board and the Manchester Corporation Reservoirs. All the three supplies are chlorinated. Almost all, over 99%, of the dwelling houses in the area have a piped water supply direct to the house. No houses derive their water supply from stand pipes but 44 premises comprised of farms and dwelling houses are supplied from well and spring water.

DRAINAGE AND SEWERAGE.

New Street Works. No new street works were carried out during 1945.

CLOSET ACCOMMODATION.

Five waste water closets were converted to fresh water closets during the year. 1,225 complaints of blocked closets were received, 1,150 of these affecting the waste water type of closet. This figure corresponds to 37.87% of the total number of waste water closets in the district. On the other hand 75 blockages of fresh water closets occurred, equivalent to 1.05% of the total in the area. In addition 355 blocked drains were cleared.

The conversion of pail closets has been the subject of discussion by the Committee from time to time and with the ending of hostilities a report was called for towards the end of the year and preliminary measures initiated to effect, so far as is possible, the complete elimination of this antiquated sanitary utensil.

	TABLE	22.		
Type of Closet Pail Closets Waste Water Closets Fresh Water Closets Total	 No. of closets, 1943 339 3,089 7,019 10,447	No. of closets, 1944 336 3,088 7,103	Converted 1945 — 5 — 5 — 5 —	No. of closets 336 3,083 7,108 10,527

The conversion of waste water closets to the fresh water type is no less urgent in my view and a scheme for their conversion should immediately succeed the resumption of slum clearance work.

ERADICATION OF BED BUGS.

During 1945, 18 houses were disinfested all being dealt with by the Hydrogen Cyanide method. No council houses required to be treated.

RATS AND MICE DESTRUCTION.

24 premises privately owned were found to be infested and treated whilst the sewage disposal works and the Council's controlled tip were kept under observation.

SWIMMING BATHS.

16,137 attendances were made by schoolchildren in conducted parties to the baths as part of their organised education.

SANITARY INSPECTION.

The following table, furnished by the Senior Sanitary Inspector, gives a summary of the work carried out by the inspectorate staff during 1945.

TABLE 23.		
Summary of Work Done		
Number of investigations made in Notifiable diseases		346
Number of statutory notices served		2
Number of statutory notices complied with		2
Number of informal notices served		1283
Number of informal notices complied with		964
Number of houses disinfected		178
Number of houses disinfested	•••	18
Number of Pail Closets converted to Fresh Water Closets		Name
Number of Waste Water Closets converted to Fresh W		~
Closets	• • • •	5
Number of visits to factories Number of visits to slaughter-houses, Butchers' shops	ond	31
places where food is prepared for sale		230
Number of visits to farms	•••	30
Number of samples of milk examined (Biologically)		96
Number of Smoke observations		
Number of houses inspected and recorded (Housing Con	ısoli-	
dated Regulations)		
Number of premises licensed for storage of petroleum		46
Number of premises licensed for storage of Carbide of Cale	cium	2
Number of complaints dealt with under Rats and	Mice	4.
Destruction Act		91
Number of families displaced from Clearance Areas		-
Number of families transferred from Clearance Areas		- 1
Number of nuisances arising from blocked closets abated		1225
Number of nuisances arising from blocked drains abated		355

SMOKE ABATEMENT.

Consideration continued to be given during the year to the problem of atmospheric pollution when it was felt that the time was ripe for resuming actively such measures for its suppression as might be practicable. The contribution of domestic smoke to the problem is well recognised and the Health Committee resolved to recommend the Housing Committee to consider the desirability of arranging, as far as possible, for the installation of smokeless grates in all future houses erected by the Council, a recommendation with which the Housing Committee has shown itself to be in complete agreement and whose underlying principles it is putting into practice.

A sound film dealing with atmospheric pollution as part of the general environmental problem was exhibited and the subject ventilated in discussion at club meetings in the area by interested members of the committee as well as by officers of the department.

The Council has continued its membership of the National Smoke Abatement Society.

HOUSING.

Plans were approved for the erection of 111 permanent brick houses on the north-east side of Long Lane on the Yew Tree site and preparation of the site began during 1945.

An exhibition showing a modern housing lay-out planned for the permanent brick houses to be erected on the above site by the Local Authority was held in the Town Hall during the year. The exhibition, which was organised by the Council's Surveyor on the instructions of the Council, demonstrated many up-to-date features including modern kitchen equipment and smokeless fuel appliances.

TABLE 24.	- 10
No. of new houses erected during the year :—	
(a) Total (including numbers given separately under (b))	Nil
(i) By the Local Authority	Nil
(ii) By other Local Authorities (iii) By other bodies and persons	Nil Nil
(b) With State assistance under the Housing Acts:—	1/11
(i) By the Local Authority (included under (a) (i)	
above)	Nil
(ii) By other bodies or persons (included under (a) (iii) above)	Nil
above)	1/11
1.—INSPECTION OF DWELLING HOUSES, DURING	
THE YEAR:—	
(1) (a) Total number of dwelling houses inspected for	
Housing defects (under Public Health or Housing Acts)	740
(b) Number of inspections made for that purpose	1607
(2) (a) No. of dwelling houses (included under sub-head (1)	
above) which were inspected and recorded under	
the Housing Consolidated Regulations, 1925	Nil
(b) Number of inspections made for that purpose	Nil
(3) No. of dwelling houses found to be in a state so	
dangerous or injurious to health as to be unfit for	NT:1
human habitation	Nil
(4) No. of dwelling houses (exclusive of those referred to	
under the preceding sub-head found not to be in all respects reasonably fit for human habitation)	740
an respects reasonably nt for numan nabitation)	740
2.—REMEDY OF DEFECTS DURING THE YEAR	
WITHOUT SERVICE OF FORMAL NOTICES:-	
No of defective dwelling houses rendered fit in consequence	
of informal action by the Local Authority or their Officers	785
Chicle III III III III III	,

TABLE 24—continued.	and pluresteen services
3.—ACTION UNDER STATUTORY POWERS DURING	
THE YEAR:— A.—Proceedings under Sections 9, 10 and 16 of Housing Act,	
1936:— (1) No. of dwelling houses in respect of which notices	
were served requiring repairs (2) No. of dwelling houses which were rendered fit after service of formal notices :—	Nil
(a) By owners	Nil
(b) By Local Authority B.—Proceedings under Public Health Acts :—	Nil
(1) No. of dwelling houses in respect of defects to be	
remedied	Nil
(a) By owners	Nil Nil
C.—Proceedings under Sections 11 and 13 of the Housing	1811
Act, 1936:—	
(1) No. of dwelling houses in respect of which Demolition Orders were made	Nil
(2) Number of dwelling houses demolished in pursuance of Demolition Orders	Nil
D.—Proceedings under Section 12 of the Housing Act, 1936	•
(1) Number of tenements or underground rooms in respect of which Closing Orders were made	Nil
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined,	
the tenements or rooms having been rendered fit	Nil
HOUSING ACT, 1936, PART IV—OVERCROWDING :—	
A.— (i) Number of dwelling houses overcrowded at the end of the year	29
(ii) Number of families dwelling therein (iii) Number of persons dwelling therein	$\frac{30}{195\frac{1}{3}}$
B.—No. of new cases of overcrowding reported during the	1002
year	Nil
C.— (i) Number of cases of overcrowding relieved during the year	Nil
(ii) Number of persons concerned in such cases	Nil

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

The number of dairy farms in the area at the end of the year was 28, these possessing some 487 cows. One farm is licensed to produce and bottle accredited milk. 16 licences were issued in respect of the distribution of pasteurised milk.

TABLE 25.	
Dairy Farms	28
Dairymen and shopkeepers registered as retail purveyers	137
Farmers and Dairymen from out-districts registered as retail	
purveyors in Chadderton	17
Shops licensed to sell pasteurised milk	16
Vendors licensed to sell pasteurised milk	4
Dairymen from out-districts licensed to sell Tuberculin Tested	
Milk (Certified)	Nil
Dairymen from out-districts licensed to sell Accredited Milk	Nil

During the year 96 samples of milk were examined for the presence of tubercle bacilli and in 7 of these, organisms were found. The samples of milk sold under licence as pasteurised were free from tubercle bacilli. The results of examinations carried out during each of the past 14 years are shown in Table 26.

	Results o	f Ran Ba	dom San	plin	BLE 26. g, for the Sold in th	Pro ie D	istrict	Tube	
Year			Danisia		NT 4!		Total		% D::t:
			Positive		Negative		Samples		Positive
1932	• • • •		2		8		10		20
1933			1		17		18		- 5.5
1934			2		17		19		10.5
1935			0		11		11		
1936			3		18		21		14.3
1937			8		50		58		13.7
1938			6		42		48		12.5
1939			0		24		24		
1940			5		57		62		8.1
1941			4		26	•••	30		13.3
1942	***		9		53		62		12.9
1943			10		82		92		10.9
1944			4		74		78		5.1
1945	•••		7		89	• • • •	96		7.3

Milk was also sampled in 96 instances in respect of its cleanliness and Table 28 sets out in detail the source of the milk sampled and the character and result of the tests carried out. 34.3% of the samples failed to pass a standard of bacterial cleanliness and safety as represented by the tests indicated in the table.

These results bring out the unsatisfactory character of milk as generally sold to-day and demonstrate the need on the one hand for efficient pasteurisation and on the other for effective technique of production. The farmer has many difficulties to contend with to-day. Difficulties with feeding stuffs, shortage of labour and shortage of new equipment are still acute but none of these constitutes an excuse for the sale of milk which is hygienically unsafe to drink.

MEAT AND OTHER FOODS.

During 1945, 230 visits were paid by sanitary inspectors to meat shops, bakehouses and places where food is prepared for sale and 47 visits were paid to other warehouses where food is stored.

Table 27 shows the type and quantity of foodstuffs condemned as unfit for human consumption.

Licences were renewed in respect of 6 slaughterhouses though slaughtering continues to be carried out at a central slaughterhouse outside the district.

101 din - CM4						
101 // (M 4					lbs.	ozs.
131 tins of Meat				 	379	10
Meat and Offal				 	64	8
124 tins of Fish				 	119	11
Prepared Meat and	Fish	Produc	ets	 	159	14
211 packages Cerea	ıls			 	240	8
6 tins Vegetables				 	7	8
Butter				 	62	7
Cheese				 	260	
13 tins Evaporated	Milk			 	11	$2\frac{1}{2}$
Bacon				 	20	_
l jar of Jam		• • •		 	1	
Plain Flour				 	360	
Self-Raising Flour				 	324	
Raisins				 	28	
Eggs				 (360)	48	

TABLÉ 28.

ANALYSIS OF MILK SAMPLES WHICH HAVE BEEN EXAMINED BIOLOGICALLY DURING THE YEAR 1945.

		Bact Cou			Coli ent in		0	-/e	ive	Sam	ples	tory .
Source of Supply	Total No. of samples	under 200,000	over 200,000	1.0 cc.	0.1 cc.	0.01 cc.	T.B. Positive	T.B. Negative	% T.B. Positive	Satisfactory	Unsatisfactory	% Unsatisfactory
Chadderton Farmers.	52	$ \begin{array}{c c} 24 \\ 7 \\ 11 \\ 7 \end{array} $	2 1	Absent + + + +	+++	· · · +	$-\frac{1}{3}$	26 6 8 6	11.5	24 6 8	2 1 3 8	26.92
Dairy Milk, Chadderton.	9	$\begin{array}{c} 3 \\ 1 \\ 2 \end{array}$		Absent + +	++	· +		3 1 5	Ni	1 3 1	5	55.55
Out-District Farmers.	23	5 2 7 5	1 2 1	Absent + + + +	+++	· · +	_ _ 1	5 3 8 6	4.3	5 2 6	1 3 6	43.47
Dairy Milk Out-Districts.	6	2 1 2	1 	Absent + +	++	· +		$\begin{array}{c} 3 \\ 1 \\ 2 \end{array}$	Ni	1 2 1	$-\frac{1}{2}$	50.00
		under 100,000	over 100,000									
Pasteurised.	5	4	-	Absent	· +	· +	<u> - </u>	4	Ni	il 4	1	20.00
	1	1	Methy Blue	ylene Test	Co	liforπ Γest	n					
Source of Supply	No. Sample	s sa p wl fa	o. of im- oles nich iled he est	No. of samples which satisfied the test	No. o samples which failed the test	h w	No. of samples which satisfied the test	sa: pl sat	es is- ng th	T.B. Positive	un	% of mples satis-ctory
Accredited Chadderton Farms.	1	1	Nil	1	Nil		1]	L	Nil	1	Nil

CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOODSTUFFS.

Sampling of foodstuffs is carried out by an inspector of the Lancashire County Council with the active assistance and cooperation of the sanitary staff of this Authority. The results of analysis of samples investigated have been supplied by the County Medical Officer of Health and are shown grouped in Table 29.

		ТА	BLE 2	29.		
Sample					No. of Samples taken	No. of Samples genuine
Milk					12	12
Other Goods	•••	•••	•••	•••	3	3

It was not necessary to institute legal proceedings in any case.



